



JFW

PTO/SB/21 (09-06)

Approved for use through 03/31/2007. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

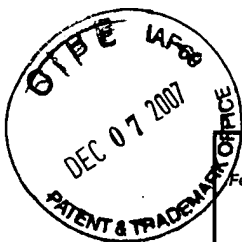
|                                                                                             |                        |                         |
|---------------------------------------------------------------------------------------------|------------------------|-------------------------|
| <b>TRANSMITTAL<br/>FORM</b><br><br>(to be used for all correspondence after initial filing) | Application Number     | 10/827,297- Conf. #2570 |
|                                                                                             | Filing Date            | April 20, 2004          |
|                                                                                             | First Named Inventor   | Michael B. Zemel        |
|                                                                                             | Art Unit               | 1616                    |
|                                                                                             | Examiner Name          | E.J. Webman             |
| Total Number of Pages in This Submission                                                    | Attorney Docket Number | 31894-199298            |

**ENCLOSURES (Check all that apply)**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> <b>Fee Transmittal Form</b><br><br><input type="checkbox"/> Fee Attached<br><br><input type="checkbox"/> Amendment/Reply<br><br><input type="checkbox"/> After Final<br><br><input type="checkbox"/> Affidavits/declaration(s)<br><br><input type="checkbox"/> Extension of Time Request<br><br><input type="checkbox"/> Express Abandonment Request<br><br><input checked="" type="checkbox"/> <b>Information Disclosure Statement, PTO/SB/08A and 22 documents</b><br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><br><input type="checkbox"/> Reply to Missing Parts/Incomplete Application<br><br><input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><br><input type="checkbox"/> Licensing-related Papers<br><br><input type="checkbox"/> Petition<br><br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><br><input type="checkbox"/> Terminal Disclaimer<br><br><input type="checkbox"/> Request for Refund<br><br><input type="checkbox"/> CD, Number of CD(s) _____<br><br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><br><input type="checkbox"/> Proprietary Information<br><br><input type="checkbox"/> Status Letter<br><br><input type="checkbox"/> Other Enclosure(s) (please identify below): |
| <b>Remarks</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                          |

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

|              |                  |          |        |
|--------------|------------------|----------|--------|
| Firm Name    | VENABLE LLP      |          |        |
| Signature    |                  |          |        |
| Printed name | Zayd Alathari    |          |        |
| Date         | December 7, 2007 | Reg. No. | 42,256 |



Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

|                                                                                                            |  |                          |                          |
|------------------------------------------------------------------------------------------------------------|--|--------------------------|--------------------------|
| <b>Effective on 12/08/2004.</b><br>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). |  | <b>Complete if Known</b> |                          |
| <b>FEE TRANSMITTAL</b><br><b>For FY 2006</b>                                                               |  | Application Number       | 10/827,297 – Conf. #2570 |
|                                                                                                            |  | Filing Date              | April 20, 2004           |
|                                                                                                            |  | First Named Inventor     | Michael B. Zemel         |
|                                                                                                            |  | Examiner Name            | E.J. Webman              |
|                                                                                                            |  | Art Unit                 | 1616                     |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27                             |  | Attorney Docket No.      | 31894-199298             |
| <b>TOTAL AMOUNT OF PAYMENT</b>                                                                             |  | <b>(\$)</b>              | <b>0.00</b>              |

**METHOD OF PAYMENT** (check all that apply)

☐ Check   ☐ Credit Card   ☐ Money Order   ☐ None   ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account   Deposit Account Number: 22-0261   Deposit Account Name: Venable LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below   ☐ Charge fee(s) indicated below, **except for the filing fee**

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17   ☒ Credit any overpayments

**FEE CALCULATION**

**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | FILING FEES |                       | SEARCH FEES |                       | EXAMINATION FEES |                       | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
|                  | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)         | Small Entity Fee (\$) |                |
| Utility          | 300         | 150                   | 500         | 250                   | 200              | 100                   |                |
| Design           | 200         | 100                   | 100         | 50                    | 130              | 65                    |                |
| Plant            | 200         | 100                   | 300         | 150                   | 160              | 80                    |                |
| Reissue          | 300         | 150                   | 500         | 250                   | 600              | 300                   |                |
| Provisional      | 200         | 100                   | 0           | 0                     | 0                | 0                     |                |

**2. EXCESS CLAIM FEES**

| Fee Description                                    | Fee (\$) | Small Entity Fee (\$) |
|----------------------------------------------------|----------|-----------------------|
| Each claim over 20 (including Reissues)            | 50       | 25                    |
| Each independent claim over 3 (including Reissues) | 200      | 100                   |
| Multiple dependent claims                          | 360      | 180                   |

|                                                                        |                     |                 |                      |                                  |                 |                      |
|------------------------------------------------------------------------|---------------------|-----------------|----------------------|----------------------------------|-----------------|----------------------|
| <u>Total Claims</u>                                                    | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> | <u>Multiple Dependent Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> |
| - 34 =                                                                 | x                   | =               |                      |                                  |                 |                      |
| HP = highest number of total claims paid for, if greater than 20.      |                     |                 |                      |                                  |                 |                      |
| <u>Indep. Claims</u>                                                   | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> |                                  |                 |                      |
| - 6 =                                                                  | x                   | =               |                      |                                  |                 |                      |
| HP = highest number of independent claims paid for, if greater than 3. |                     |                 |                      |                                  |                 |                      |

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

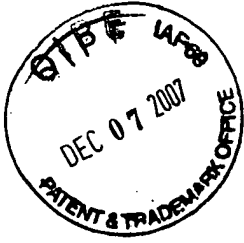
|                     |                     |                                                         |                 |                      |
|---------------------|---------------------|---------------------------------------------------------|-----------------|----------------------|
| <u>Total Sheets</u> | <u>Extra Sheets</u> | <u>Number of each additional 50 or fraction thereof</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> |
| - 100 =             | /50                 | (round up to a whole number) x                          | =               |                      |

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): \_\_\_\_\_

|                     |               |                                   |                  |
|---------------------|---------------|-----------------------------------|------------------|
| <b>SUBMITTED BY</b> |               |                                   |                  |
| Signature           |               | Registration No. (Attorney/Agent) | 42,256           |
| Name (Print/Type)   | Zayd Alathari | Telephone                         | (202) 344-8164   |
|                     |               | Date                              | December 7, 2007 |



Docket No.: 31894-199298  
(PATENT)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Patent Application of:  
Zemel et al.

Art Unit: 1616

Application No: 10/827,297

Examiner: E. J. Webman

Confirmation No: 2570

Filed: April 20, 2004

Atty. Docket No: 31894-199298

For: DIETARY PLANS BASED ON CALCIUM

Customer No:

**\*26694\***

**26694**

PATENT TRADEMARK OFFICE

**INFORMATION DISCLOSURE STATEMENT (IDS)**

MS AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

Pursuant to 37 CFR 1.56, 1.97 and 1.98, the attention of the Patent and Trademark Office is hereby directed to the references listed on the attached PTO/SB/08. It is respectfully requested that the information be expressly considered during the prosecution of this application, and that the references be made of record therein and appear among the "References Cited" on any patent to issue therefrom. Copies of **Documents B1-B4** and **C1-C18** are enclosed.

Document C15 was cited in counterpart Application No. 10/827,353 in an Office Action dated September 18, 2007. Document C13 was cited in counterpart Application No. 10/827,309 in

an Office Action dated October 16, 2007. Documents C16-C18 were cited in counterpart Application No. 10/066,057 in an Office Action dated November 26, 2007.

This Information Disclosure Statement is filed before the first office action (37 CFR 1.97(b)(3)). Applicant(s) hereby petition(s) that the Information Disclosure Statement be considered.

In accordance with 37 CFR 1.98(a)(2)(ii), Applicant has not submitted copies of U.S. patents and U.S. patent applications. Applicant submits herewith copies of foreign patent documents and non-patent literature in accordance with 37 CFR 1.98(a)(2).

In accordance with 37 CFR 1.97(g), the filing of this Information Disclosure Statement shall not be construed to mean that a search has been made or that no other material information as defined in 37 CFR 1.56(a) exists. In accordance with 37 CFR 1.97(h), the filing of this Information Disclosure Statement shall not be construed to be an admission that any patent, publication or other information referred to therein is "prior art" for this invention unless specifically designated as such.

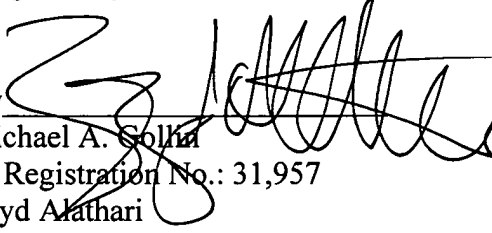
It is submitted that the Information Disclosure Statement is in compliance with 37 CFR 1.98 and the Examiner is respectfully requested to consider the listed references.

We believe that no fees are required with the submission of this IDS. However, the Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 22-0261, under Order No. 31894-199298.

Dated: December 7, 2007

Respectfully submitted,

DC2/901786

By   
Michael A. Solha  
Registration No.: 31,957  
Zayd Alathari  
Registration No.: 42,256  
VENABLE LLP  
P.O. Box 34385  
Washington, DC 20043-9998  
(202) 344-4000  
(202) 344-8300 (Fax)  
Attorney/Agent For Applicant